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IDWR/NORTHERN

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

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IDWR / NORTH

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE PALOUSE RIVER BASIN WATER
SYSTEM

CIVIL CASE NUMBER: 59576

Ident. Number: 87-10251
Date Received: 5/7/2019
Receipt No: N034291
Claim Fee: \$2500
Received By: Jea

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day

1. Name of Claimant(s)

CAROL THOMPSON
1387 DEEP CREEK RD
POTLATCH ID 83855-9777

Phone: (208) 875-1095

2. Date of Priority: 2/9/2005

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
42N	05W	2	SE SW		LATAH	

5. Description of diverting works:

Well, pump and pipeline to home and 3 stock tanks

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
DOMESTIC	01/01	12/31	0.04		
STOCKWATER	01/01	12/31	0.03		

7. Total Quantity Appropriated is:

0.07 C.F.S. and/or A.F.A.

8. Non-irrigation uses:

1 home with lawn irrigation

9. Place of use:

DOMESTIC within LATAH County

Township	Range	Section	¼	of	¼	Lot	Acres
42N	05W	2	SE		SW		

STOCKWATER within LATAH County

Township	Range	Section	¼	of	¼	Lot	Acres
42N	05W	2	NW		SW		
42N	05W	2	SE		SW		

10. Do you own the property listed above as place of use? Yes

If your answer is no, describe in remarks below the authority you have to claim this water right.

11. Other Water Rights Used:

12. Remarks:

Priority Date Explanation:
Well Drillers Report

13. Basis of Claim: Beneficial Use

14. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the PALOUSE River Basin Adjudication." (b.) I/We do ____ do not X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

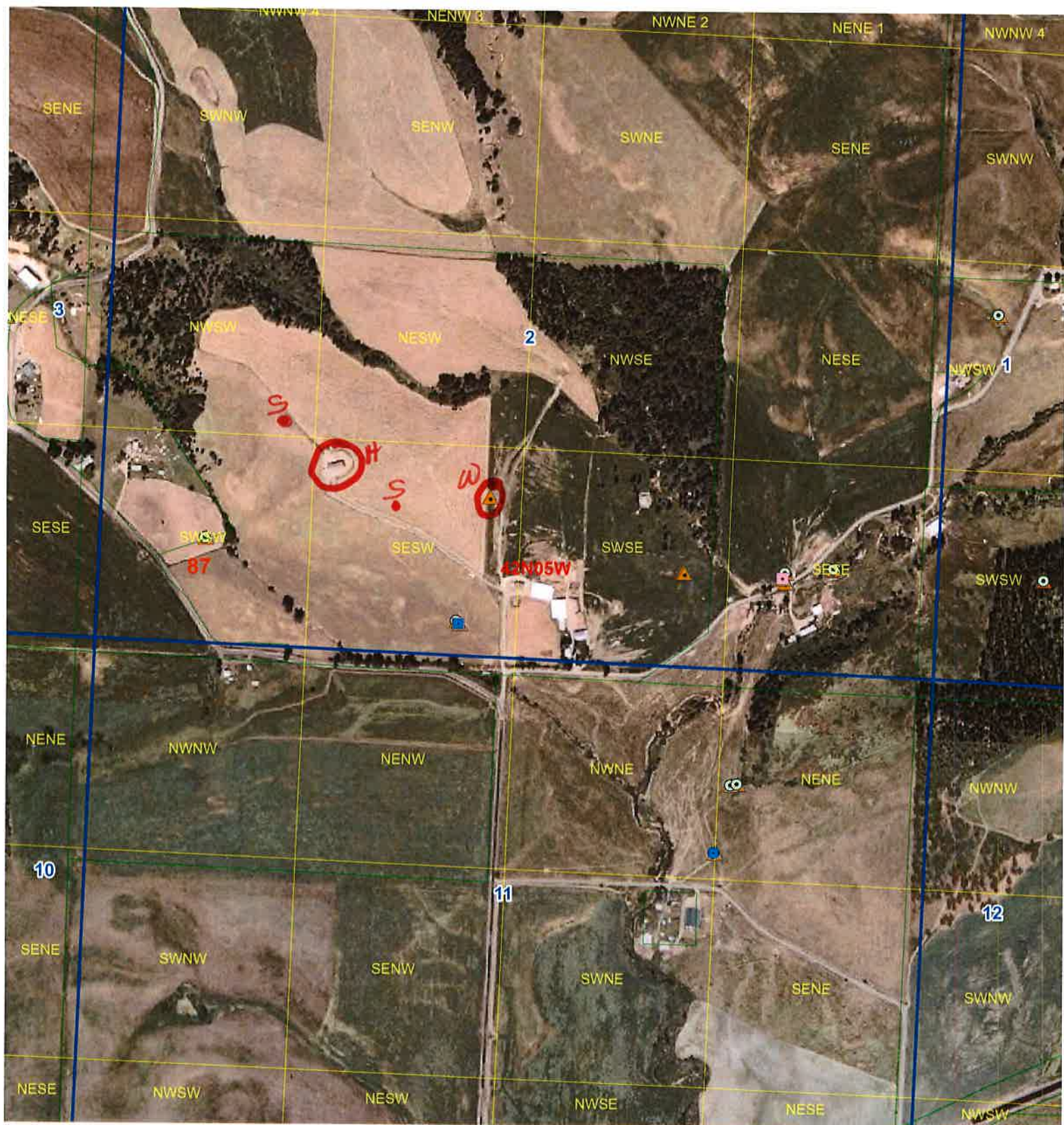
Number of attachments: 2

For Individuals:

I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): Carol Thompson Date: 5/7/2019

Date: _____



IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
_____ 1/4	_____ 1/4	_____ 1/4	
Lat: _____	: _____	Long: _____	: _____

1. WELL TAG NO. D 0039898
 DRILLING PERMIT NO. 827475
 Water Right or Injection Well No. _____

2. OWNER:
 Name Coral Thompson
 Address 1402 Deep Cr Rd
 City Coaldale State Id Zip 83855

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 42 North ☒ or South ☐
 Rge. 5 East ☐ or West ☒
 Sec. 2 1/4 SE 1/4 SE 1/4
 Gov't Lot _____ County Latah 10 acres 40 acres 160 acres

Lat: _____ Long: _____
 Address of Well Site 5 miles E of
Deep Cr Rd City Moscow
 (Give at least name of road + distance to road or landmark)
 Lt. _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>60</u>	<u>8 bags</u>	<u>Dry</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 120

Was drive shoe seal tested? ☒ Y ☐ N How? not

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>72</u>	<u>178</u>	<u>200</u>	<u>steel</u>	☒	☐	☒	☐
<u>4 1/2"</u>	<u>-20</u>	<u>400</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method law cut

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>450</u>	<u>500</u>	<u>3/4 X 3</u>	<u>150</u>	<u>4.5</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

100 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

Top of Well

42N 5W 2

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>50 gpm</u>			

Water Temp. 54° Bottom hole temp. 54°

Water Quality test or comments: Good

Depth first Water Encounter 460

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water	Y	N
<u>10</u>	<u>0</u>	<u>2</u>	<u>dirt</u>			
	<u>2</u>	<u>24</u>	<u>clay</u>			☒
	<u>24</u>	<u>100</u>	<u>soft brown clay</u>			☒
<u>6</u>	<u>106</u>	<u>120</u>	<u>soft basalt</u>			☒
<u>6</u>	<u>120</u>	<u>190</u>	<u>med black basalt</u>			☒
	<u>190</u>	<u>285</u>	<u>Hard grey basalt</u>			☒
	<u>285</u>	<u>303</u>	<u>soft black basalt</u>			☒
	<u>303</u>	<u>445</u>	<u>Hard grey basalt</u>			☒
	<u>445</u>	<u>500</u>	<u>soft black basalt</u>			☒
			<u>50 gpm</u>			

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Completed Depth 500.18 (Measurable)

Date: Started 2/7/05 Completed 2/9/05

14. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name Uhlenkott Drill Firm No. 125

Principal Driller Jim Uhlenkott Date 3/8/05

and Driller or Operator II _____ Date _____

Operator I _____ Date _____

Principal Driller and Rig Operator Required.
Operator I must have signature of Driller/Operator II.